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	PATENT
Attorney's Docket No. 0788.0005	
COMBINED DECLARATION AND POWER	OF ATTORNEY
COMBINED DECLARATION AND FOWER	OF ATTORNET
(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPI	PLEMENTAL, DIVISIONAL
CONTINUATION OR CIP)	
	==========
As a below named inventor, I hereby declare that:	

TYPE OF DECLARATION

This declaration is of the following type: (check one applicable item below) X original design supplemental

[NOTE: If the declaration is for an International Application being filed as a divisional, continuation or continuation-in-part application do not check next item; check appropriate one of last three items.]

national stage of PCT

[NOTE: If one of the following 3 items apply then complete and also attach ADDED PAGES FOR DIVISIONAL, CONTINUATION OR CIP.]

	divisional
	continuation
X	continuation-in-part (CIP)

INVENTORSHIP IDENTIFICATION

[WARNING: If the inventors are each not the inventors of all the claims an explanation of the facts, including the ownership of all the claims at the time the last claimed invention was made, should be submitted.]

My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor or an original, first and joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

DUMMY PLUG FOR WIRING HARNESS

SPECIFICATION IDENTIFICATION

The specification of which: (complete (a), (b) or (c)

(a) X is attached hereto.

(b)	was filed on	as	Serial No. 0 /	· .
	or Express N	Iail No., a	s Serial No. not yet known	and was
amended on _	(if app	olicable).		7
			in PCT International Applicat	
	filed on		and as amended und	er PCT Article 19 on
	(if any).			
			, e	
		_	l papers are deposited with th	
		_	being referred to in the declar	
			th the application papers or, in	
supplemental	declaration, are tho	se amendm	nents claiming matter not enco	ompassed in the
original states	ment of invention or	claims. S	ee 37 CFR 1.67.]	
ACKNO	OWLEDGEMENT	OF REVII	EW OF PAPERS AND DUI	Y OF CANDOR
identified sne	•		ewed and understand the cons	
identified spe	emeation, metading	the claims	s, as amended by any amendin	ient referred to above.
	I acknowledge the	duty to dis	close to the Office all inform	ation known to the
person to be i	material to patentabi	llity as defi	ned in §1.56.	
	In co	ompliance v	with this duty there is	

PRIORITY CLAIM

attached an information disclosure statement, 37 CFR §1.97.

I hereby claim foreign priority benefits under Title 35, United States Code §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

(complete (d) or (e))

(d)	X	no	such	applications	have	been	filed.
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(e) ___ such applications have been filed as follows.

[NOTE: Where item (c) is entered above and the International Application which designated the U.S. claimed priority check item (e), enter the details below and make the priority claim.]

EARLIEST FOREIGN APPLICATION(S), IF ANY FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

COUNTRY	APPLICATION No.	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 37 USC 119
			YES NO

		YES NO
		YES NO
		YES NO
	·	YES NO

	ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS (6
	MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION
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POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

COVECTE TETECT

Roger D. Emerson 33,169

(check the following item, if applicable)

____ Attached as part of this declaration and power of

attorney is the authorization of the above-named attorney(s) to accept and follow instructions from my representative(s).

SEND CORRESPONDENCE TO

DIRECT TELEPHONE CALLS TO:

Daniel A. Thomson

Daniel A. Thomson

One Cascade Plaza

(330) 535-9999

Fourteenth Floor

Akron, OH 44308

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

Full name of sole or first inventor: Patrick L. Horner

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Full name of second joint inventor, if any:
Inventor's Signature
Date Country of Citizenship
Residence:
Post Office Address:
CHECK PROPER BOX(ES) FOR ANY OF THE FOLLOWING ADDED PAGE(S) WHI
FORM A PART OF THIS DECLARATION
Signature for third and subsequent joint inventors. Number of pages added
Signature by administrator (trix), executor (trix) or legal representative for decreased
incapacitated inventor. Number of pages added
Signature for inventor who refuses to sign or cannot be reached by person authorized
under 37 CFR §1.47. Number of pages added

	Added pages to combined declaration and power of attorney for divisional,
	continuation, or continuation-in-part (CIP) application.
	Number of pages added

	Authorization of attorney(s) to accept and follow instructions from representative

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H N	If no further pages form a part of this Declaration then end this Declaration with this
1" 1" 1" I	page and check the following item
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: De	emma Plug	for i	Wing !	Harres
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Docket No.:

Filed:

Art Unit: UNKNOWN

Examiner: UNKNOWN

Commissioner of Patents and Trademarks Washington, D.C. 20231

CERTIFICATE OF MAILING (37 CFR 1.8a)

I hereby certify that this ASSOCIATE POWER OF ATTORNEY is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the: Commissioner of Patents and Trademarks, Washington, D.C. 20231.

ASSOCIATE POWER OF ATTORNEY

Dear Sir:

In the matter of the above-identified application, please recognize Marcella R. Louke (Registration No. 41,163), John M. Skeriotis (Registration No. 43,129), Timothy D. Bennett (Registration No. 42,312), Daniel A. Thomson (Registration No. 43,189), and Kimberly A. Raines (Registration No. P45,696) of Emerson & Associates, 159 S. Main Street, Suite 830, Key Building, Akron, Ohio 44308, as my associate attorneys or agents, with full power to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

All communications, however, are to be addressed to Emerson & Associates, 4421 Ranchwood Spur, Akron, Ohio 44333-1343.

Emerson, Reg. No. 33,169

Attorney for Applicant(s)